Caption of Case) IN RE:  APPLICATION OF AIR VOICE WIRELESS, LLC D/B/A FEELSAFE WIRELESS FOR DESIGNATION AS AN ELIGIBLE TELECOMMUNICATIONS CARRIER IN THE STATE OF SOUTH CAROLINA			BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  COVER SHEET  DOCKET 20/9-14-C NUMBER: 2014 350 C			
(Please type or print	)				2019	
Submitted by:	Victoria Martin		SC Bar Number:		July	
Address:	1725 Windward C	oncourse, Suite 150	Telephone:	(678)672-283	51	
	Alpharetta, Georg	ia 30005	Fax:	(770)232-920	9: 4	
			Other:		4 A N	
			Parameter Company of the Company of	comcounsel.com	of pleadings or other papers	
Emergency R  Other:		OCKETING INFO	RMATION (Cho	eck all that apply on Commission	's Agenda expeditiously	
INDUSTRY (C	heck one)	NATU	URE OF ACTION	(Check all tha	t apply)	
☐ Electric		Affidavit	Letter		Request 0	
☐ Electric/Gas		Agreement	Memorandun	a	Request for Certifica	
☐ Electric/Telecon	mmunications	Answer	☐ Motion		Request for Investigation	
☐ Electric/Water		Appellate Review	Objection		Resale Agreement	
☐ Electric/Water/	Telecom.	Application	Petition		Resale Amendment	
☐ Electric/Water/S	Sewer	Brief	Petition for R	Reconsideration	Reservation Letter	
Gas		Certificate	Petition for R	ulemaking	Response	
Railroad		Comments	Petition for Ru	le to Show Cause	Response to Discovery	
Sewer		Complaint	Petition to Int	tervene	Return to Petition	
□ Telecommunica	ations	Consent Order	Petition to Inte	ervene Out of Time	Stipulation	
☐ Transportation		Discovery	Prefiled Testi	imony	Subpoena	
Water		Exhibit	Promotion		☐ Tariff	
☐ Water/Sewer		Expedited Consideration	n Proposed Ord	ler	Other:	
Administrative	Matter	Interconnection Agreemen	t Protest	KE	CEIVED	
Other:		Interconnection Amendme	nt Publisher's A	ffidavit	UN 28 2019	
		Late-Filed Exhibit	Report		PSC SC MAIL / DMS	

### Lance J.M. Steinhart, P.C.

Attorneys At Law 1725 Windward Concourse Suite 150 Alpharetta, Georgia 30005

Also Admitted in New York

Email: lsteinhart@telecomcounsel.com

Telephone: (770) 232-9200 Facsimile: (770) 232-9208

June 26, 2019

### VIA FEDERAL EXPRESS

Chief Clerk of the Commission South Carolina Public Service Commission 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210 (803) 896-5100

Re:

Air Voice Wireless, LLC d/b/a FeelSafe Wireless

Docket No. 2014-350-C

Dear Sir/Madam:

Pursuant to Order No. 2014-888 in the above-referenced docket, enclosed please find for filing the Company's ETC Annual Report.

I have enclosed an extra copy of this letter to be date-stamped and returned to me in the self-addressed, postage prepaid envelope I have provided.

If you have any questions or if I may provide you with any additional information, please do not hesitate to contact me.

Respectfully submitted,

Lance J.M. Steinhart, Esq.

Managing Attorney

Lance J.M. Steinhart, P.C.

Attorneys for Air Voice Wireless, LLC d/b/a FeelSafe Wireless

**Enclosures** 

cc: OR

ORS via USPS (2 copies)

RECEIVED
JUN 2 8 2019

PSC SC MAIL / DMS

# THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

### **DOCKET NO. 2014-350-C**

# ETC ANNUAL REPORT OF AIR VOICE WIRELESS, LLC D/B/A FEELSAFE WIRELESS

Pursuant to 26 S.C. Code Ann. Regs. 103-690.1 and Order No. 2014-888, Air Voice Wireless, LLC d/b/a FeelSafe Wireless ("Air Voice" or "the Company"), by undersigned counsel, hereby submits its 2019 Eligible Telecommunications Carrier ("ETC") Annual Report and respectfully requests that the South Carolina Public Service Commission ("Commission") certify the Company's continued eligibility to receive federal low income support for the 2020 calendar year. Air Voice submits the following in compliance with 26 S.C. Code Ann. Regs. 103-690.1:

### I. Certification of compliance with CTIA Consumer Code (103-690.1(B)(a))

The Company certifies that it is in compliance with the CTIA Consumer Code for Wireless Service, as it is required to do pursuant to 47 C.F.R. § 54.202(a)(3). See also Exhibit A.

### II. Lifeline Reporting

### 103-690.1(b)(3) - Requests for service that were unfulfilled

The Company is unaware of any unfulfilled requests for service from Lifeline-eligible customers for the prior calendar year.

### 103-690.1(b)(4) - Number of complaints per 1,000 handsets

The Company had 0 complaints per 1,000 handsets in the prior calendar year.

# 103-690.1(b)(5) - Certification of compliance with applicable service quality standards and consumer protection rules

The Company certifies that it is in compliance with all applicable service quality and consumer protection requirements and standards, including the CTIA Consumer Code for Wireless Service. See also Exhibit A.

### 103-690.1(b)(6) - Certification of ability to function in emergency situations

The Company provides service by reselling the network services of AT&T Wireless ("AT&T") and certifies that it is able to remain functional in emergency situations based on 47 C.F.R. § 54.202(a)(2). The Company relies on AT&T's network reliability in all situations, including emergency situations. Through its agreement with AT&T, Air Voice provides to its customers the same ability to remain functional in emergency situations as currently provided by AT&T to its own customers, including access to a reasonable amount of back-up power to ensure functionality without an external power source, the ability to reroute traffic around damaged facilities, and the capability of managing traffic spikes resulting from emergency situations.

### 103-690.1(b)(7) - Certification regarding provision of comparable local usage plan

The Company certifies that it offers a local usage plan comparable to that offered by the incumbent LEC ("ILEC") in the relevant service areas. The Company's offering exceeds those of the ILEC in several respects. The Company offers customers a certain amount of service free of charge. Air Voice customers can use these free minutes to place calls statewide (and even nationwide) because the Company does not constrict customers' use by imposing a local calling area requirement. The Company also provides Lifeline customers with E911 capabilities and access to voice mail, caller I.D., and call waiting services at no cost. Air Voice's Lifeline rate plans can be found at https://www.feelsafewireless.com/terms-of-service.

### 103-690.1(b)(8) - Certification regarding equal access

The requirement to provide equal access to long-distance carriers in the event that no other ETC is providing equal access within its designated service area has been eliminated from federal rules governing ETC designation. As such, the Company believes this requirement to no longer be applicable.

### 103-690.1(b)(9) - Number of Lifeline customers

The Company had 98 Lifeline customers as of December 31 of the prior year.

### 103-690.1(b)(10) - Copies of responses to the Lifeline Verification Survey or Certification filed with USAC

The Company has previously filed with the Commission a copy of its most recent Annual Lifeline Certification (Form 555) filed with the Universal Service Administrative Company ("USAC"). See attached Exhibit B for a copy of Air Voice's FCC Annual Report (Form 481).

Respectfully submitted,

Lance J.M. Steinhart

Lance J.M. Steinhart, P.C.

1725 Windward Concourse, Suite 150

Alpharetta, Georgia 30005

(770) 232-9200 (Phone)

(770) 232-9208 (Fax)

E-Mail: Isteinhart@telecomcounsel.com

Attorneys for Air Voice Wireless, LLC d/b/a FeelSafe Wireless

June 21, 2019

### EXHIBIT A

### CERTIFICATION

# STATE OF MICHIGAN COUNTY OF OAKLAND

Personally came and appeared before me, the undersigned Notary, the within named Jim Bahri, CEO of Air Voice Wireless, LLC d/b/a FeelSafe Wireless ("the Company"), and makes this his statement and Affidavit upon oath and affirmation of belief and personal knowledge that the matters, fact and things set forth in the foregoing report are true and correct to the best of his knowledge.

Jim Bahri, CEO

Air Voice Wireless, LLC d/b/a FeelSafc Wireless

SWORN TO and subscribed before me, the undersigned Notary Public, the 1.3 day of June, 2019.

My Commission expires OCTOBER 6, 2020

MĒLIŠSA KALLABAT Notary Public - Michigan **Oakland County** My Commission Expires Oct 6, 2020 Acting in the County of ORKLAND

### EXHIBIT B

FCC Form 481

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FC€ För	m 481 - Carrier Annual Reporting Data Collection Form	FCC Form 45.1 OMB Control No: 3060-0386/OMB Control No. 3060-0319 July 2018
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name: Person USAC should contact with questions about this data	Melissa Kallabat
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	mkallabat@airvoicewireless.com
	Form Type	54.422

(200) Ser Data Coll	vice Outage Re ection Form	eporting (Vol	ç <b>e</b> )	*	* * 3	* * * *	*		° OM	Form 481 B Control No. 3060 2018	-0986/QMB Control N	vo. 3060-0819
<010>	Study Area Co	.do				24000						
		Study Area Code 249027										
<015>	Study Area Na					Airvoice Wi	reless LLC			<del></del>		<del></del>
<020>	Program Year					2020			-	<del></del>		
<030>			Should contac			Melissa Kal						
<035>			- Number of pe				ext.					
<039>	Contact Email	Address - Ema	Il Address of pe	erson identified	in data line <0	)30> mkallabat@a	irvoicewireless.c	om				
<210>	For the prior	r calendar ye:	ar, were there	any reportal	ble voice serv	ice outages?						
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>&gt;</d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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				<del></del>								<del>                                     </del>
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		100	*	· · · · · · · · · · · · · · · · · · ·
(400) Number of Complaints per 1,000 customers	*			FCC Form 481
1 " " " * " * " " " " " " " " " " " " "			•	OME Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form				SOINE COULDS NOT 2000-0395/CWS COURS NOT 2000-0913
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				July 2018
• *	4	~ Sec.		24 8 1 NO 1

<010>	Study Area Code	24 9027		
<015>	Study Area Name	Airvoice Wireless LLC		
<020>	Program Year	2020		
<030>	Contact Name - Person USAC should contact regarding this data			
<035>	Contact Telephone Number - Number of person identified in data line			
<039>	Contact Email Address - Email Address of person identified in data line mkallabateatryolcovireless.com <030>			
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.			
<410>	Complaints per 1000 customers for fixed voice			
<420>	Complaints per 1000 customers for mobile voice			

	npliance With Service Quality Standards and Consumer Protection Rules lection Form		"FCC Form 481 OMB Control No. 3060-0986/CMB Control No. 3060-08	
*	Ø6 ±		July 2018	
<010>	Study Area Code	249027	4	
<015>	Study Area Name	Airvoice Wireless LLC		
<020>	Program Year	2020	Δ	
<b>&lt;</b> 030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat		
<035>	Contact Telephone Number - Number of person identified in data line <030>	7482391061 ext		
<039>	Contact Email Address - Email Address of person Identified in data line <030>	mkallabat@airvoicewireless.com		

) Functionality in Emergency Situations* a Collection Form	×	FCC Form 481 OMB Control No3060-0986/OMB Control No. 3060-0819 July 2018
0> Study Area Code	249027	
S> Study Area Name	Airvoice Wireless LLC	
0> Program Year	2020	
0> Contact Name - Person USAC should contact regarding this data	Melissa Kallabat	
S> Contact Telephone Number - Number of person identified in data line <0	30> 2482391061 ext.	
9> Contact Email Address - Email Address of person identified in data line <	)3()> mkallabat@airvoicewireless.com	
> Certify compliance regarding ability to function in emergency situations		
> Descriptive document for Functionality in Emergency Situations		

	erating Companiest ection Forms			FCG Formi481 OMB*Control No. 3060=09867,OMB;Control No. 3060-0819 July 2018
<010>	Study Area Code	249027		
<015>	Study Area Name	Airvoice Wire	Nana IIG	
<020>	Program Year	2020	Tess her	
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kalla	ahat	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ex		
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@ai	rvoicewireless.com	
<810>	Reporting Carrier Air Voice Wireless, LLC			
<811>	Holding Company Not Applicable			
<u> &lt;812&gt;</u>	Operating Company Not Applicable			
<813>			** <a2></a2>	\$a3>
	Affiliates		SAC	Doing Business As Company or Brand Designation
				E
		<u></u>		
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	bal Cande Reporting. lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com
<900>	Does the filing entity offer tribal land services? (Y/N)	
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal*Government Engagement Obligation	Name of Attached Document
If your o	company serves Tribal lands, please select (Yes,No, NA) for each these boxes	
•	rm the status described on the attached PDF, on line 920,	
	strates coordination with the Tribal government pursuant to	Select
	3(a)(5) includes:	Yes or No or
<921>	Needs assessment and deployment planning with a focus on Tribal	Not Applicable
<922>	community anchor institutions.	
<923>	Feasibility and sustainability planning;	
<924>	Marketing services in a culturally sensitive manner;	
	Compliance with Rights of way processes	
<925>	Compliance with Land-Use permitting requirements	
<926>	Compliance with Facilities Siting rules	
<927>	Compliance with Environmental Review processes	<del></del>
<928>	Compliance with Cultural Preservation review processes	
ヘコムゴン	Compliance with Tribal Business and Licensing requirements.	

		Page 8
	oice and Broadband Service Rate Comparability ection Rorm:	EGC Form 481  OMB Control No. 2060-0986/6MB Control No. 2060-0819  JUJY 2018
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com
<1000>	Voice services rate comparability certification	
<1010>	Attach detailed description for voice services rate comparability compliance	
	<del></del>	Name of Attached Document
<1020>	Broadband comparability certification	
<1030>	Attach detailed description for broadband comparability compliance	

Name of Attached Document

	o Jerrestrjal Backhaulikeporting Jection Form	FGC Förm:481*  OMB Control No., 3060-0986/OMB Control No., 3060-0819 july-2018*
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps
<1140>	Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.	
ž <del>e.,,</del>		

Lifeline	rms and Condition for Lifeline Customers ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <0	
<039>	Contact Email Address - Email Address of person identified in data line <0	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
		Name of Attached Document
<1220>	Link to Public Website	http://www.feelsafewireless.com/DesktopSouthCarolina aspx
or the we	heck these boxes below to confirm that the attached document(s), on line 1210, ebsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	]
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll cails, and rates for each such plan.	<u> </u>

Data Collecti	Cap Garrier Additional Documentation onlorm e-of-Return Corriers offiliated with Price Cap Local Exchange Corriers			FCC Form 481 OMB Control No. July 2018	3060-0986/Ol/IB Control (Vo. 3060-0819)
<010> Sti	ıdy Area Code	249027			
	rdy Area Code	Airvoice Wireless LLC		<del></del>	<del></del>
	ogram Year	2020			
	ntact Name - Person USAC should contact regarding this data	Melissa Kallabat			
	ntact Telephone Number - Number of person identified in data line <030>	2482391061.ext.			
<039> Co	ntact Email Address - Email Address of person Identified In data line <030>	mkallabat@airvoicewireles	98.COM		
to offset	e appropriate responses below (Yes, No, Not App access charge reductions, and Connect America P I in the documents attached below is accurate.				
<2015	> 2016 and future Frozen Support Certification 47 CFF	(§ 54.313(c)(4)			
Price Ca	o Carrier Connect America ICC Support {47 CFR §	54.313(d)}			
<2016>	Certification support used to build broadband				
Connect	America Phase II Reporting (47 CFR § 54.313(e))				
<2017A>	Connect America Fund Phase II recipient?				
<2017C>	Total amount of Phase II support, if any, the price cap capital expenditures in 2018.	carrier used for			
<2018>	Attach the number, names, and addresses of commu	nity anchor	Name of Attached Docume	nt Listing	
	institutions to which the carrier newly began providin broadband service in the preceding calendar year - 54		Required Information	-	-
<2019>	Recipient certifies that it bid on category one telecom	munications and			
	Internet access services in response to all FCC Form 4			<u> </u>	
•	broadband service that meets the connectivity target				
	libraries universal service support program for eligible			L	
	libraries located within any area in a census block who	ere the carrier is			

receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in

urban areas for comparable offerings - 54.313(e)(1)(ii)(C)

<010> Study Area Code <015> Study Area Name Airvoice Wireless LLC <020> Program Year <030> Contact Name - Person USAC should contact regarding this data <035> Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Melissa Kallabat Contact Telephone Number - Number of person identified in data line <030> Mallabat@airvoicewireless.com	(3005) Rate O Data Collectio	Of Return Carrier Additional Documentation	Page 12 CC FORM 481  OMB Control No. 3050-0985/OMB Control No. 3050-0819
Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Melissa Kallabat Contact Telephone Number - Number of person identified in data line <030> Melissa Kallabat Contact Email Address - Email Address of person identified in data line <030> Mkallabat@airvoicewireless.com	<010>	Study Area Code	249027 PR
Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> Melissa Kallabat Contact Email Address - Email Address of person identified in data line <030> Mkallabat@airvoicewireless.com	<015>	Study Area Name	Airvoice Wireless LLC
Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030> METISSA RATIADAL Contact Telephone Number - Number of person identified in data line <030> Meallabat Meallabat Mailabat Meallabat	<020>	Program Year	2020
<035> Contact Telephone Number - Number of person identified in data line <030> 2482391061 ext. <039> Contact Email Address - Email Address of person identified in data line <030> mkallabat@airvoicewireless.com	<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<039> Contact Email Address - Email Address of person identified in data line <030> mkallabat@airvoicewireless.com =	<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
CONTRACTOR OF THE PROPERTY OF	<039>	·	ω 

Does this filing retain a Cost Consultant and/or Firm, or other Third Party to prepare financial and (3007)operations data disclosures submitted to the National Exchange Carrier Association (NECA), USAC, or the Administrator?

(3007a)  Name of Consultant	(3007b)  Name of Consultant Firm/Third Party

### **CAF BLS Reporting**

(3008C)

(3008A)	Please indicate whether new locations were deployed during the prior calendar year.											
(3008B)	Please enter the number of new locations deployed in the prior calendar year associated with each of the following speed tiers.											
(3008B1)	Number of newly built locations with access to broadband speeds of at least 10/1 Mbps but less than 25/3 Mbps.											
(3008B2)	Number of newly built locations with access to broadband speeds of 25/3 Mbps or higher.											

Please provide the percentage of deployment across the entire study area.

3005  Rite Of Return Carrier Additional Documentation   PCC Form 481	la. 3060-0119
--	---------------

<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
(3010A)	Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i))				
(3010B)	Please Provide Attachment				
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Information			
(3012B)	Please Provide Attachment	Name of Attached Documenton	ment Lis	ting Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	0	0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	O	0	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports		Γ	` <del>-</del>	
	(Operating Report for Telecommunications Borrowers)				
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		L		<u></u>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Docur Information	ment Lis	ting Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the	(Yes/No)	0	0	
(3019)	boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS				
(3020)	Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the				
(3022)	boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for				
(3023)	Telecommunications Borrowers Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows				p
(3026)	Attach the worksheet listing required information	Name of Attached Docum Information	nent List	ting Required	

(3005) Ra Data Coll	re of Return Carrier Additional Cotumentation (Continued) ections or	FCC Form 481  *OMB Control No:: 3050-0986/OMB Co
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person Identified In data line <030>	mkallabat@airvoicewireless.com
DESCRIPTION OF THE PERSON OF T		

Financial Data Summary	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

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(4005) Rural Broadband Experiment Additional (	ocumentation	197 ° (12) (13) * "	" வீ	TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER	Carlot Francis
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<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melisea Kallabat
<035>	Contact Telephone Number - Number of person identified in data fi	ne <030> 2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data I	ine <030> mkailabatwairvoicewireless.com

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations and provide a list of newly served community anchor institutions.

#### Public Interest Obligations ~ FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas.

#### Community Anchor Institutions - FCC 14-98 (paragraph 79)

**4003a.** RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

#### If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses

Name of Attached Document Listing Required Information of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

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<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	MeJison Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless com

5005 Alaska Plan

(5010)	Do you participate in the Alaska plan?	(Yes/No)

Please indicate whether any terrestrial backhaul or other satellite backhaul became (5011) commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul. (Yes/No)

If the filing carrier identified in its approved perfomance plans that it relies exclusively on

(5012) satellite backhaul for a certain poriton of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previoius calendar year in areas that were previoiusly served exclusively by satellite backhaul.

	Dete Backhoul Available	Newly Served Locations or Population
	<u> </u>	**************************************
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7		
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Proceedings of the	Ion - Reporting Carrier ection Form	FCCForm 481 OMB Control No: 3060-0986/OMB Control No: 3060-0819 July 2018
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier:		
Signature of Authorized Officer:		Date
Printed name of Authorized Officer:		
Fitle or position of Authorized Officer:		······································
Telephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

1 30/2009 20 32	ion - Agent / Carrier ection Form	FCC Form 481 OMB Control No: 3060-0986/OMB Control No: 3060-0819 July 2018
<010>	Study Area Code	249027
<015>	Study Area Name	Airvoice Wireless LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Melissa Kallabat
<035>	Contact Telephone Number - Number of person identified in data line <030>	2482391061 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mkallabat@airvoicewireless.com

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent) Expert Telecom Compliance is authorized to submit the information reported on behalf of the reporting carrier also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.			
Name of Authorized Agent: Expert Telecom Compliance			
Name of Reporting Carrier: Airvoice Wireless LLC			
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/20/2019		
Printed name of Authorized Officer: Jim Bahri			
Title or position of Authorized Officer: CEO			
Telephone number of Authorized Officer: 2483453900 ext.			
Study Area Code of Reporting Carrier: 249027	Filing Due Date for this form: 07/01/2019		

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier			
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service supp		•	
the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the infor  Name of Reporting Carrier:  Airvoice Wireless LLC	rmation reported herein is accurate	-	
Name of Reporting Carrier: Airvoice Wireless LLC  Name of Authorized Agent Firm: Expert Telecom Compliance			
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/14/2019	
Name of Authorized Agent Employee: Victoria Martin			
Title or position of Authorized Agent or Employee of Agent Regulatory Specialist	*		
Telephone number of Authorized Agent or Employee of Agent: 6786722831 ext.			
Study Area Code of Reporting Carrier: 249027 Filing Due Date for this form: 07/	/01/2019		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Ac 18 of the United States Code, 18 U.S.C. § 1001.	act of 1934, 47 U.S.C. §§ 502, 503(b), or 1	fine or imprisonment under Title	

Attachments